



**Recipient Information**

**1. Recipient Name**  
 COUNTY OF SANTA BARBARA ALCOHOL,  
 DRUG, MENTAL HEALTH  
 300 N SAN ANTONIO RD  
 SANTA BARBARA, CA 93110

**2. Congressional District of Recipient**  
 24

**3. Payment System Identifier (ID)**  
 1956002833B2

**4. Employer Identification Number (EIN)**  
 956002833

**5. Data Universal Numbering System (DUNS)**  
 149656154

**6. Recipient's Unique Entity Identifier**  
 PM14B6H7PEK7

**7. Project Director or Principal Investigator**  
 Tammy Casiano  
  
 tcasiano@sbcbswell.org  
 805-325-5905

**8. Authorized Official**  
 Antonette Navarro  
 anavarro@sbcbswell.org  
 805-681-5233

**Federal Agency Information**

**9. Awarding Agency Contact Information**  
 Sarah Dayhoff  
 Grants Specialist  
 Sarah.Dayhoff@samhsa.hhs.gov  
 (240) 276-1688

**10. Program Official Contact Information**  
 Dawnielle Tillman  
 Program Official  
 dawnielle.tillman@samhsa.hhs.gov  
 240-276-1572

**Federal Award Information**

**11. Award Number**  
 1H79SM089819-01

**12. Unique Federal Award Identification Number (FAIN)**  
 H79SM089819

**13. Statutory Authority**  
 Section 224 of the Protecting Access to Medicare Act of 2014

**14. Federal Award Project Title**  
 SBC Behavioral Wellness AOT Program Expansion

**15. Assistance Listing Number**  
 93.997

**16. Assistance Listing Program Title**  
 Assisted Outpatient Treatment

**17. Award Action Type**  
 New Competing

**18. Is the Award R&D?**  
 No

<b>Summary Federal Award Financial Information</b>	
<b>19. Budget Period Start Date 09/30/2024 – End Date 09/29/2025</b>	
<b>20. Total Amount of Federal Funds Obligated by this Action</b>	\$499,991
20a. Direct Cost Amount	\$415,275
20b. Indirect Cost Amount	\$84,716
<b>21. Authorized Carryover</b>	
<b>22. Offset</b>	
<b>23. Total Amount of Federal Funds Obligated this budget period</b>	\$499,991
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>	\$0
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>	\$499,991
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<b>26. Project Period Start Date 09/30/2024 – End Date 09/29/2028</b>	
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period</b>	\$499,991

**28. Authorized Treatment of Program Income**  
 Additional Costs

**29. Grants Management Officer - Signature**  
 Eileen Bermudez

**30. Remarks**

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.



Assisted Outpatient Treatment Program  
Department of Health and Human Services  
Substance Abuse and Mental Health Services Administration

Notice of Award

**Issue Date:** 09/13/2024

Center for Mental Health Services

**Award Number:** 1H79SM089819-01  
**FAIN:** H79SM089819  
**Program Director:** Tammy Casiano

**Project Title:** SBC Behavioral Wellness AOT Program Expansion

**Organization Name:** COUNTY OF SANTA BARBARA ALCOHOL, DRUG, MENTAL HEALTH

**Authorized Official:** Antonette Navarro

**Authorized Official e-mail address:** anavarro@sbcbswell.org

**Budget Period:** 09/30/2024 – 09/29/2025

**Project Period:** 09/30/2024 – 09/29/2028

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$499,991 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to COUNTY OF SANTA BARBARA ALCOHOL, DRUG, MENTAL HEALTH in support of the above referenced project. This award is pursuant to the authority of Section 224 of the Protecting Access to Medicare Act of 2014 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at [www.samhsa.gov](http://www.samhsa.gov) (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,  
Eileen Bermudez  
Grants Management Officer  
Division of Grants Management  
[eileen.bermudez@samhsa.hhs.gov](mailto:eileen.bermudez@samhsa.hhs.gov)  
See additional information below

**SECTION I – AWARD DATA – 1H79SM089819-01**

**Award Calculation (U.S. Dollars)**

Personnel(non-research)	\$282,461
Fringe Benefits	\$132,814
<b>Direct Cost</b>	<b>\$415,275</b>
Indirect Cost	\$84,716
Approved Budget	\$499,991
Federal Share	\$499,991
Cumulative Prior Awards for this Budget Period	\$0
<b>AMOUNT OF THIS ACTION (FEDERAL SHARE)</b>	<b>\$499,991</b>

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	\$499,991
2	\$499,991
3	\$499,991
4	\$499,991

Note: Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

**Fiscal Information:**

CFDA Number: 93.997  
 EIN: 1956002833B2  
 Document Number: 24SM89819A  
 Fiscal Year: 2024

<b>IC</b>	<b>CAN</b>	<b>Amount</b>
SM	C96J670	\$499,991

IC	CAN	2024	2025	2026	2027
SM	C96J670	\$499,991	\$499,991	\$499,991	\$499,991

**SM Administrative Data:**

PCC: AOT-24 / OC: 4145

**SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79SM089819-01**

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

**SECTION III – TERMS AND CONDITIONS – 1H79SM089819-01**

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.

- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 75 as applicable.
- d. The HHS Grants Policy Statement.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

**Treatment of Program Income:**

Use of program income – Additive: Recipients will add program income to funds committed to the project to further eligible project objectives. Sub-recipients that are for-profit commercial organizations under the same award must use the deductive alternative and reduce their subaward by the amount of program income earned.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

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**SECTION IV – SM SPECIAL TERMS AND CONDITIONS – 1H79SM089819-01**

**REMARKS**

**New Award**

**1. This Notice of Award (NoA) is issued to inform your organization that the application submitted through the Notice of Funding Opportunity *SM-24-006 Assisted Outpatient Treatment (AOT)* has been selected for funding.**

- This award reflects **conditional** approval of the budget submitted with the application on ***April 25, 2024***.
  - ***See Revised Budget special condition***
- This award additionally reflects acceptance of supporting documentation submitted via 2-way correspondence on ***August 16, 2024*** and ***August 26, 2024***.

**2. Recipients are expected to plan their work to ensure that funds are expended within the 12-month budget period reflected on this Notice of Award.** If activities proposed in the approved budget cannot be completed within the current budget period, SAMHSA cannot guarantee the approval of any request for carryover of remaining unobligated funding.

**3. All responses to award terms and conditions must be submitted as PDF documents in eRA Commons.** For more information on how to respond to tracked terms and conditions or how to submit a post award amendment request please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading *Grant Management Reference Materials for Grantees*.

**4. All Post Award Amendments must be submitted in eRA Commons for prior approval.** Please refer to the SAMHSA website for specific guidance on how to submit a post award amendment in eRA Commons:

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<https://www.samhsa.gov/grants/grants-management/post-award-amendments>.

Prior approval is required for, but is not limited to: a change in key personnel and level of effort, a budget revision, a change in scope, a formal carryover request, and a no cost extension. Reference the full prior approval term on the SAMHSA website under Standard Terms and Conditions at:

<https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>.

Technical questions regarding the submission of a post-award amendment in eRA Commons should be directed to the eRA Service Desk: <http://grants.nih.gov/support>

**5. Register Program Director/Project Director (PD) in eRA Commons:** If you have not already done so, you must register the PD in eRA Commons to assign a Commons ID. Once the PD has received their Commons ID, please send this information to your Grants Management Specialist. You can find additional guidance on Managing eRA User Accounts at <https://www.samhsa.gov/grants/grants-training-materials/managing-user-accounts>

## 6. Key Personnel

Key Personnel are listed below:

- o *Tammy Casiano, Project Director @ 50% level of effort (20% federal and 30% in-kind)*
- o *TBD, Evaluator @ @ 50% level of effort (20% federal and 30% in-kind)*

***\*Please note, once key staff are known, you must submit a key staff change post award amendment via eRA Commons.\****

Organizations receiving Federal Funds may not exceed 100% level of effort combined across all funding sources (federal and non-federal) for any program staff member, Key Personnel or otherwise.

Any changes to Key Personnel, including level of effort involving separation from the project for any continuous period of three months or longer, or a reduction in time dedicated to the project of 25% or more, requires prior approval and must be submitted as a post award amendment in eRA Commons.

Note: If an organization is awarded a grant and chooses to move forward with hiring an individual for a Key Personnel position before receiving SAMHSA formal approval, this will be done at the organization's own risk.

For additional information on post award amendment requirements, please visit the SAMHSA website: <https://www.samhsa.gov/grants/grants-management/post-award-amendments>.

## **SPECIAL TERMS**

### **Disparity Impact Statement (DIS)**

By **November 29, 2024**, submit via eRA Commons a **Disparity Impact Statement**.

SAMHSA's Behavioral Health Disparity Impact Statement (DIS) is a data-driven, quality improvement approach to advance behavioral health equity for all. The DIS is a grant requirement that helps grantees identify racial, ethnic, sexual, and gender minority groups at the highest risk of experiencing behavioral health disparities within their grant projects and implement a disparity reduction action

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plan with a quality improvement process to address and close the identified gap(s). The DIS should be consistent with the Population of Focus and Statement of Need identified in the grant application and include the components as described below. Please refer to the DIS worksheet, examples, and other resources on the SAMHSA website at: <https://www.samhsa.gov/grants/grants-management/disparity-impact-statement>

The main components of the DIS are:

- Identify and describe the behavioral health disparity within the population of focus of the grant project that experience disparate access, use, and outcomes.
- Provide a demographic table of the proposed number of individuals to be served, reached, or trained in the grant project that covers the entire grant period. Identify the data sources used to support the rationale for how the determination of the disparity was made.
- Identify the social determinants of health (SDOH) domains and the Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS) Standards that the grantee organization will work to address and improve for the identified population(s) of focus.
- Develop a disparity reduction quality improvement action plan to address behavioral health disparities based on the available data on access, use, and outcomes.

In accordance with the reporting requirements outlined in the Notice of Funding Opportunity (NOFO), the grantee is required to provide an update on the project's progress towards addressing quality care of underserved populations related to the Disparity Impact Statement (DIS), barriers encountered, including challenges serving populations of focus, efforts to overcome these barriers; evaluation activities for tracking DIS efforts; and a revised quality improvement plan if the DIS does not meet the quality of care requirements as stated in the DIS.

All responses to award terms and conditions must be submitted as PDF documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading *How to Respond to Terms and Conditions in the Notice of Award*.

## SPARS

All SAMHSA grant recipients are required to collect and report certain data so that SAMHSA can meet its obligation under the Government Performance and Results Act (GPRA) Modernization Act of 2010. These data are gathered using SAMHSA's Performance and Accountability Reporting System ([SPARS](#)).

AOT recipients are required to collect and report in SPARS two types of data: one data set [Infrastructure Development, Prevention, and Mental Health Promotion (IPP)] are reported on a quarterly basis; the second data set is for the National Outcome Measures (NOMs) and data are collected and reported at baseline (i.e., upon entry of each client into the project), at six month follow-up and at discharge.

AOT recipients are required to do the following:

- (1) Complete SPARS Annual Goals training and enter IPP and NOMS annual goals data into SPARS by **December 29, 2024**;

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- (2) Begin collecting and entering IPP data into SPARS in the second quarter (**January - March 2025**);
  - (3) Begin entering NOMS baseline interview data into SPARS within 7 days after completion of each intake interview;
  - (4) conduct a NOMs reassessment interview six months following the intake interview and every 6 months thereafter and enter these data into SPARS; and
  - (5) conduct a Clinical Discharge NOMS interview at the time of client discharge and enter these data into SPARS.

SPARS training and technical assistance will be provided post award.

## AOT Services

1. AOT grant recipients may only use awarded funds for clients under civil commitment orders through civil court proceedings.
2. AOT grant funds may not be utilized for criminal justice diversion programs such as criminal court, mental health court or drug court.
3. AOT grant recipients using Assertive Community Treatment (ACT) as an Evidence Based Practice for their Assisted Outpatient Treatment program must provide assurance that AOT grant funds are only funding ACT services (not complete ACT Teams) for clients under current civil commitment orders.

## Risk Assessment

The Office of Financial Advisory Services (OFAS), SAMHSA may perform an administrative review of your organization's financial management systems, policies, procedures and records. If the review discloses material weaknesses or other financial management concerns, grant funding may be restricted in accordance with [45 CFR 75/2 CFR 200](#), as applicable. The restriction will affect your organization's ability to withdraw funds from the Payment Management System account, until the concerns are addressed.

## SPECIAL CONDITIONS

### Revised Detailed Budget with Justification

By **October 30, 2024**, submit the following via eRA Terms Tracker:

1. **Revised Detailed Budget with Justification:** Provide a detailed line-item breakdown of costs with an accompanying narrative justification. To prevent calculation errors and expedite review, it is highly recommended to use the SAMHSA Budget Template. The SAMHSA Budget Template, user guide, and [sample budget](#) can be accessed at <https://www.samhsa.gov/grants/applying/forms-resources>. Revise the budget to address the following:
  1. **Revised Detailed Budget**
    - a. Personnel



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- i. You must provide written narrative and justification for each position.
  - ii. Once each position is known, you must separate out each individual onto a separate line item and name each individual within the detailed budget.
- b. Indirect Costs
    1. Ensure your organization follows your internal policies and procedures consistent with the federal regulations regarding the allocation and processing of indirect costs outlined in 45 CFR 75.414 & 45 CFR 75.414(e)(5).

All responses to award terms and conditions must be submitted as PDF documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading *How to Respond to Terms and Conditions*.

## **STANDARD TERMS AND CONDITIONS**

### **Mid-Year Programmatic Progress Report**

By **April 29, 2025**, submit via eRA Commons a mid-year **Programmatic Progress Report**.

The mid-year Programmatic Progress Report (PPR) is required for the first year budget period only and must be submitted as a PDF under the *View Terms Tracking Details* page in eRA Commons.

The mid-year programmatic progress report (PPR) must be submitted via eRA Commons as a PDF file using the OMB-approved template which will be provided to you by your GPO. The PPR must be entered in the approved template and, at a minimum, include the following information:

- o Updates on key personnel, budget, or project changes (as applicable).
- o Progress achieving goals and objectives and implementing evaluation activities.
- o Progress implementing required activities, including accomplishments, challenges and barriers, and adjustments made to address these challenges.
- o Problems encountered serving the populations of focus and efforts to overcome them.
- o Progress and efforts towards reducing rates of hospitalization, incarceration, homelessness, and interactions with the criminal justice system for the population of focus; cost-savings and public health outcomes, including rates of mortality, suicide, substance abuse, and participant satisfaction with treatment.
- o Progress and efforts made to achieve the goal(s) of the DIS, including qualitative and quantitative data and any updates, changes, or adjustments as part of a quality improvement plan. Demographic information regarding participation of those served by the award compared to demographic information in the population of the recipient.
- o Progress and efforts on use of services, patient and family satisfaction with program participation.

**Please contact your Government Program Official (GPO) for program specific submission information.** Note: Recipients must also comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the FOA or by the Grant Program Official (GPO). This information is needed in order to comply with PL 102-62, which requires that Substance Abuse and Mental Health Services Administration (SAMHSA) report evaluation data to



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ensure the effectiveness and efficiency of its programs.

For more information on how to respond to tracked terms and conditions please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading *How to Respond to Terms and Conditions*.

Additional information on reporting requirements is available at <https://www.samhsa.gov/grants/grants-management/reporting-requirements>.

## Annual Programmatic Progress Report

By **December 28, 2025**, submit via eRA Commons an annual **Programmatic Progress Report**.

The Programmatic Progress Report (PPR) is required on an annual basis and must be submitted no later than 90 days after the end of each 12-month budget period/incremental period.

The annual programmatic progress report (PPR) must be submitted via eRA Commons as a PDF file using the OMB-approved template which will be provided to you by your GPO. The PPR must be entered in the approved template and, at a minimum, include the following information:

- o Updates on key personnel, budget, or project changes (as applicable).
- o Progress achieving goals and objectives and implementing evaluation activities.
- o Progress implementing required activities, including accomplishments, challenges and barriers, and adjustments made to address these challenges.
- o Problems encountered serving the populations of focus and efforts to overcome them.
- o Progress and efforts towards reducing rates of hospitalization, incarceration, homelessness, and interactions with the criminal justice system for the population of focus; cost-savings and public health outcomes, including rates of mortality, suicide, substance abuse, and participant satisfaction with treatment.
- o Progress and efforts made to achieve the goal(s) of the DIS, including qualitative and quantitative data and any updates, changes, or adjustments as part of a quality improvement plan. Demographic information regarding participation of those served by the award compared to demographic information in the population of the recipient.
- o Progress and efforts on use of services, patient and family satisfaction with program participation.

**Please contact your Government Program Official (GPO) for program specific submission information.** Note: Recipients must also comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the FOA or by the Grant Program Official (GPO). This information is needed in order to comply with PL 102-62, which requires SAMHSA to report evaluation data to ensure the effectiveness and efficiency of its programs.

The response to this term must be submitted as PDF documents in eRA Commons under the *View Terms Tracking Details* page. For more information on how to respond to tracked terms and conditions, refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading *How to Respond to Terms and Conditions*.

Additional information on reporting requirements is available at <https://www.samhsa.gov/grants/grants-management/reporting-requirements>.

## Annual Federal Financial Report (FFR or SF-425)

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All financial reporting for recipients of Health and Human Services (HHS) grants and cooperative agreements has been consolidated through a single point of entry, which has been identified as the Payment Management System (PMS). The Federal Financial Report (FFR or SF-425) initiative ensures all financial data is reported consistently through one source; shares reconciled financial data to the HHS grants management systems; assists with the timely financial monitoring and grant closeout; and reduces expired award payments.

The FFR is required on an annual basis and must be submitted **no later than 90 days after the end of each incremental period/budget period**. The FFR should reflect cumulative amounts. Additional guidance to complete the FFR can be found at <http://www.samhsa.gov/grants/grants-management/reporting-requirements>.

SAMHSA reserves the right to request more frequent submissions of FFRs. If so, the additional submission dates will be shown below.

Your organization is required to submit an FFR for this grant funding as follows:

- By **December 28, 2025**, submit the Federal Financial Report (FFR)/(SF-425).
- The grant recipient staff member(s) responsible for FFR preparation, certification and submission of the FFR must either submit a request for New User Access or Update User Access to the FFR Module as applicable. Refer to the PMS User Access website <https://pms.psc.gov/grant-recipients/user-access.html> for information on how to submit a New User Access, Update User Access or Deactivate User Access. You can also view PMS Video on how to request new user access @ <https://youtu.be/kdoqaXfiuI0> and PDF resource with instructions on Requesting Access @ [https://pms.psc.gov/forms/New-User-Request\\_Grantee.pdf](https://pms.psc.gov/forms/New-User-Request_Grantee.pdf)
- Instructions on **how to submit an FFR via PMS** are available at <https://pmsapp.psc.gov/pms/app/help/ffr/ffr-grantee-instructions.html> (The user must be logged in to PMS to access the link). Updates to the FFR instructions effective 4/1/2022 are also available @ <https://pms.psc.gov/grant-recipients/ffr-updates.html>
- While recipients must submit the FFR in PMS, the FFR can also be accessed by connecting seamlessly from the eRA Commons to PMS by clicking the Manage FFR link on the Search for Federal Financial Report (FFR) page in eRA Commons, which will redirect to PMS. SAMHSA will not accept FFRs submitted by email or uploaded as an attachment into eRA. To access the Manage FFR link in eRA Commons, the individual must be registered in eRA Commons and assigned the Financial Status Reporter (FSR) role for their organization. The individual assigned the FSR role is responsible for reporting the statement of grant expenditures for their organization. Refer to the page [Managing eRA User Accounts](#) on SAMHSA's website for instructions on how to assign the FSR role.

**If you have questions about how to set up a PMS account for your organization, please contact the PMS Help Desk at [PMSSupport@psc.hhs.gov](mailto:PMSSupport@psc.hhs.gov) or 1-877-614-5533.**

Note: While recipients will use PMS to report all financial expenditures as well as to drawdown funds, recipients will continue to use eRA Commons for all other grant-related matters, including submitting progress reports, requesting post award amendments, and accessing grant documents such as the Notice of Award.

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## Standard Terms for Awards

Your organization must comply with the Standard Terms and Conditions for the Fiscal Year in which your grant was awarded. The Fiscal Year for your award is identified on your Notice of Award. SAMHSA's Terms and Conditions webpage is located at: <https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>.

### Standards for Financial Management

Recipients and subrecipients are required to meet the standards and requirements for financial management systems set forth in 45 CFR part 75 Subpart D. The financial systems must enable the recipient and subrecipient to maintain records that adequately identify the sources of funds for federally assisted activities and the purposes for which the award was used, including authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and any program income. The system must also enable the recipient and subrecipient to compare actual expenditures or outlays with the approved budget for the award. SAMHSA funds must retain their specific identity – they may not be commingled with non-federal funds or other federal funds. Commingling funds typically means depositing or recording funds in a general account without the ability to identify each specific source of funds with related expenditures.

### Reasonable Costs for consideration

Recipients must exercise proper stewardship over Federal funds and ensure that costs charged to awards are allowable, allocable, reasonable, necessary, and consistently applied regardless of the source of funds according to Reasonable Costs consideration per 2 CFR 200.404 and the Factors affecting allowability of costs per 2 CFR 200.403. A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

### Consistent Treatment of Costs

Recipients must treat costs consistently across all federal and non-federal grants, projects and cost centers. Recipients may not direct-charge federal grants for costs typically considered indirect in nature, unless done consistently. If part of the indirect cost rate, then it may not also be charged as a direct cost. Examples of indirect costs include (administrative salaries, rent, accounting fees, utilities, office supplies, etc.). If typical indirect cost categories are included in the budget as direct costs, it is SAMHSA's understanding that your organization has developed a cost accounting system adequate to justify the direct charges and to avoid an unfair allocation of these costs to the federal government. Also, note that all awards are subject to later review in accordance with the requirements of [45 CFR 75.364](#), [45 CFR 75.371](#), [45 CFR 75.386](#) and [45 CFR Part 75, Subpart F](#), Audit Requirements.

### Compliance with Award Terms and Conditions

FAILURE TO COMPLY WITH THE ABOVE STATED TERMS AND CONDITIONS MAY RESULT IN ACTIONS IN ACCORDANCE WITH [45 CFR 75.371](#), REMEDIES FOR NON-COMPLIANCE AND [45 CFR 75.372](#) TERMINATION. THIS MAY INCLUDE WITHHOLDING PAYMENT, DISALLOWANCE OF COSTS, SUSPENSION AND DEBARMENT, TERMINATION OF THIS AWARD, OR DENIAL OF FUTURE FUNDING.

*All previous terms and conditions remain in effect until specifically approved and*

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*removed by the Grants Management Officer.*

**Staff Contacts:**

Dawnielle Tillman, Program Official

**Phone:** 240-276-1572 **Email:** dawnielle.tillman@samhsa.hhs.gov

Sarah Dayhoff, Grants Specialist

**Phone:** (240) 276-1688 **Email:** Sarah.Dayhoff@samhsa.hhs.gov **Fax:** (240) 276-1420